

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TD	870	66-26-01
RESPONSE FORMALITY REVIEW	78	1127	10/15/01

INDEX OF CLAIMS

✓	.....	Rejected	N	.....	Non-elected
≡	.....	Allowed	I	.....	Interference
—	(Through numeral)...	Canceled	A	.....	Appeal
⋮	.....	Restricted	O	.....	Objected

Claim		Date
Final	Original	
1	1	✓
2	2	✓
3	3	✓
4	4	✓
5	5	0
6	6	0
7	7	0
8	8	✓
9	9	0
10	10	0
11	11	0
12	12	✓
13	13	✓
14	14	✓
15	15	✓
16	16	✓
17	17	0
18	18	✓
19	19	✓
20	20	✓
21	21	✓
22	22	0
23	23	✓
24	24	0
25	25	0
26	26	0
27	27	✓
28	28	0
29	29	✓
30	30	✓
31	31	✓
32	32	✓
33	33	✓
34	34	✓
35	35	✓
36	36	✓
37	37	0
38	38	0
39	39	✓
40	40	✓
41	41	✓
42	42	✓
43	43	0
44	44	0
45	45	✓
46	46	✓
47	47	0
48	48	✓
49	49	"
50	50	"

Claim		Date					
Final	Original						
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Claim		Date
Final	Original	
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**If more than 150 claims or 10 actions
staple additional sheet here**

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